



Annual General Meeting- Proxy Form

To be returned by Thursday 19 November 2026

By Email: agm@nswstoma.org.au

I, _____, being a member of **NSW Stoma Ltd**
and entitled to attend and vote hereby appoint:

☐

The Chairman of the meeting (mark box)

*Or if you are NOT appointing the Chairman of the meeting as your proxy,
please write the name and email of the person you are appointing as your
proxy (an email will be sent to your appointed proxy with details on how to
access the virtual meeting)*

Name:

Email:

Voting Direction

*Proxies will only be valid and accepted by the Company if they are signed and
received no later than 48hours before the Meeting. Please mark any of the
boxes with an ☐ x*

Resolution

1. To approve the minutes from the 2025 AGM.

For

☐

Against

☐

Abstain*

☐

2. To approve the 2025-2026 audited accounts.

For

☐

Against

☐

Abstain*

☐



**If you mark the Abstain box, you are directing your proxy not to vote on your behalf on a poll or show of hands and your vote will not be counted in computing the required majority on a poll.*

Full name of member:

Signature of member:

NSW Stoma Ltd Member number: